APPLICATION FOR COURT APPOINTED ATTORNEY

NAME		CAUSE NO:	D	ATE:	_DOB:	PIN:
RESULT PERJUR (\$10,00	IN YOUR PROSECUTION FOR INCLUDES IMPRISONMENTO).	NT, ACCURATE, AND TRUE. INTE R THE OFFENSE OF AGGRAVATE I NOT TO EXCEED TEN (10) YEA	D PERJU ARS ANI	JRY, A FELON' D A FINE NO	Y. THE PUNIS T TO EXCEED	SHMENT FOR AGGRAVATED TEN THOUSAND DOLLARS
		RRIED / NOT MARRIED (circle o				
live in	my household and who rel	y upon me for their support. T	heir age	es are:		·
INCOM	My monthly house	sehold income from all source	c ic ¢			received in the
			د د د			_, received in the
TOHOWI	ng amounts from the follo	wing sources.				
1.	Salary:		7.	Workman's	Comp	
2.			8.	Other Gov't		
3.	Clail al Commanda		9.	Pension		
4.			10.	Interest		
5.	Conial Conventure		11.	Other incor	ne	
6.	Disability _			Other meor		
0.	_					
PROPE	RTY/ASSETS: I own the	following property with the value	es (minu	s lien indebte	dness) listed b	pelow:
1.	Homo		7.	Bank Accou	ntc:	
	Home:					
2.	Cars:		8.	Savings Acc	ounts:	
3.	Boats:		9.	Cash:		
4.	Other vehicles:		10.	Other Real		
5.	Stocks / Bonds:		11.	Guns /lives		
6.	Collections:		12.	All other as	sets , excludir	ng household furniture:
	le to pay AND HEREBY AGREE ntil I have paid the amount o	TO PAY \$ per month to f \$350.00.	to help o	offset the cost	of providing a	a court appointed attorney
counsel request financia	in the trial of the charge per the court to appoint couns	, 20, I have been ad ending against me. I am withou el for me. By signing my name rate, and true. By signing belo to determine my eligibility.	t means e below,	to employ co	ounsel of my t all of the al	own choosing and I hereby pove information about my
			DEFEND	ANT'S SIGNATUR	E	
	SUBSCRIBED and SWOF	RN to before me, the undersigned authori	ty, this	day of		, 20
			NOTARY	PUBLIC/PERSON	AUTHORIZED TO	ADMINISTER OATHS
For use	by Office of Indigent Defense	only: DEFENDANT MEETS ELIGIBILITY	REQUIRE	MENTS YES	5NO	UNDETERMINED
ΔΡΡΟΙΝΤ	ED ATTORNEY'S NAME:					Revised: 10/3/2011